

(REFERENCE COPY - Not for submission)

Renewal of License

File Number: 0000124198 | Submit Date: 10/07/2020 | Call Sign: WLCI-LP | Facility ID: 131994 | FRN: 0012071353

State: Ohio City: NELSONVILLE

Service: FL Purpose: Renewal of License Status: Pending Status Date: 10/07/2020 Filing Status: Active

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

Fees, Waivers, and Exemptions

Section	Question	Response
Waivers	Does this filing request a waiver of the Commission's rule(s)?	No
	Total number of rule sections involved in this waiver request:	

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
HOCKING TECHNICAL COLLEGE educational institution Doing Business As: HOCKING TECHNICAL COLLEGE	Scott Winland for Hocking College 3301 HOCKING PARKWAY NELSONVILLE, OH 45764 United States	+1 (740) 753-3591	winlands14721@hocking. edu	Other

Contact Representatives (2)

Contact Name	Address	Phone	Email	Contact Type
KEITH E. LAMONICA	Keith Lamonica	+1 (508) 230-	KEITH@LAMONICA.	Technical
Consulting Engineer	18 MOUNTAIN	7258	COM	Representative
Consulting Engineer	ROAD			
	N. EASTON, MA			
	02356			
	United States			
Scott Winland	Scott Winland	+1 (740) 753-	winlands14721@hocking.	Program Manage
Program Manager, Music	3301 Hocking	3591	edu	/Instructor
Management Program	Pkwy			
HOCKING TECHNICAL COLLEGE	Nelsonville, OH			
	45764			
	United States			

Certification

Section	Question	Response
General Certification Statements	The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by authorization or otherwise, and requests an Authorization in accordance with this application (See Section 304 of the Communications Act of 1934, as amended.).	
	The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. §862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1. 2002(b) of the rules, 47 CFR §1.2002(b), for the definition of "party to the application" as used in this certification §1.2002 (c). The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	
Authorized Party to Sign	FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application. WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, §503).	
	I certify that this application includes all required and relevant attachments.	Yes
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	Scott Winland Program Mananger Hocking College School of Music
		10/07/2020

Attachments

Information not provided.